STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	aura M. Weston		
II. Name of lobbyist's partnership	, firm or corporation, if any:		
MM Weston + A (Name of partnershi	SSOCIAKS, PLLC p, firm or corporation)		
PO BOX 990		NH	03302
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(1003) 224 · 4077 (Telephone)	(403) 224 - 4099 (Fax)	e-mail Maur	ae MMWeston, on mi
III. This statement covers: (Choose reportable expense transactions w			nay file a separate report for
All reportable transactions occu	rring in the months prior to the rep	oorting date relative to	the following client:
New England Cabl	e and Telecomm of Client as it appears on the Lobbyist	UNICATIONS Registration Form)	Association
OR ☐ All reportable transactions by th unrelated to any particular client.			
IV. Date of Report April 26, 2 Reports cover: activity from date of		July 26, 2017	y 7
October 2	5, 2017 🗆	January 31, 2018 vivity from 10/1/17 to 12/3	
V. There have been no fees rec If this box is checked, complete just Concord, NH 03301.			
VI. Check if additional reports a	e attached:		
If you have received fees or ma	de expenditures, you must file Ad	dendum A- Fees and	Expenses
If you have paid an honorarium Expense Reimbursement	or reimbursed expenses, you mus	t file Addendum B – F	Report of Honorariums or
If you, your firm, or your famil	y has made political contributions,	, you must file Addend	lum C- Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my kno	SA 14-C and RSA 664 and hereby	swear or affirm that the	e foregoing information is true
ジハノカア		1-31-18	
(Signature of lobbyist)		(E	Date)
Maura M. Weston (Print Name of lobbyist)			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Maura M. Weston	
II. Name of lobbyist's partnership, firm or corporation, if any:	
MM Weston & Associates, PLLC (Name of partnership, firm or corporation)	
III. Name of Client New England Cabu and Telecommunications Associa	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)\$ 12,000-
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 34,007 ear)
c) Total of all fees received to date (Add lines a and b)	0)\$ 48,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office extenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid openses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported 	a)\$ 12,000
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$/2,000
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$_36,100
f) Total of all expenses year to date	1)\$ 48,000
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	S
Sworn Statement/Affirmation by Lobbyist	***************************************
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
1 h D	1-31-18
(Signature of lobbyist)	(Date)
Maura M. Western (Print Name of Johnvist)	